PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



CONFIRMATION NO.

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE an appropriate. All further correspondence including the Patent, advance orders and no indicated unless corrected below or directed otherwise in Block 1, by (a) specifying maintenance fee notifications.	PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where of tification of maintenance fees will be mailed to the current correspondence address as a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying

03/22/2005 20987 7590 VOLENTINE FRANCOS, & WHITT PLLC ONE FREEDOM SQUARE 11951 FREEDOM DRIVE SUITE 1260

RESTON, VA 20190

06/24/2005 MBEYENE2 00000003 10673676

1400.00 OP 01 FC:1501 300.00 OP 02 FC:1504 12 00 00 FC-8001 APPLICATION NO. FILING DATE

FIRST NAMED INVENTOR

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Signature) (Date)

ATTORNEY DOCKET NO.

10/673,676 09/30/2003 Suguru Sasaki OKI.581 2034

TITLE OF INVENTION: OPTIMIZATION METHOD OF APERTURE TYPE OF PROJECTION ALIGNER

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400		\$300	\$1700	06/22/2005			
EXA	EXAMINER ART		IIT	CLASS-SUBCLASS]				
FULLER, RODNEY EVAN		2851		355-067000	•				
CFR 1.363). Change of correspor Address form PTO/SB/	ce address or indication of "F adence address (or Change of 122) attached. ation (or "Fee Address" Indic or more recent) attached. Us	Согтеѕропоепсе	(1) the na or agents (2) the na registered 2 registered	nting on the patent front page, li mes of up to 3 registered pater OR, alternatively, me of a single firm (having as attorney or agent) and the nan ed patent attorneys or agents. If name will be printed.	nt attorneys 1	RANCOS & WHITT, PLLC			
	D RESIDENCE DATA TO E			(print or type) The patent. If an assign for filing an assignment.	nee is identified below, the d	locument has been filed for			
(A) NAME OF ASSIGN				TOF THING an assignment. CE: (CITY and STATE OR CO		•			
Oki Electric	Industry Co., Ltd.		Tol	kyo, Japan					
Please check the appropriate	te assignee category or catego	ories (will not be pr	inted on the p	oatent): 🗖 Individual 🖾 C	orporation or other private gr	oup entity Government			
4a. The following fee(s) are	e enclosed:	41	o. Payment of	Fee(s):					
X Issue Fee			A check in the amount of the fee(s) is enclosed.						
Publication Fee (No	small entity discount permitt	ed)	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # o	of Copies4		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number						
5. Change in Entity Statu	s (from status indicated above	e)	_			•			
a. Applicant claims S	aims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) cords of the United States Pat	ue Fee and Publica will not be accepte ent and Trademark	tion Fee (if and from anyon Office.	ny) or to re-apply any previousle other than the applicant; a reg	y paid issue fee to the application is paid issue fee to the application or agent; or the paid is the paid is the paid is paid in the paid in	ation identified above. he assignee or other party in			
	() (\ \ / /)				06-22-05	., , ,			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

ANDREW J. TELESZ, JR.

Authorized Signature

Typed or printed name

33,581

Date

Registration No.

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 OF B. 1251)						Docket No. OKI.581				
Applicant(s): Suguru Sasaki										
Application No. 10/673,676	Filia n Data \	ATENT & THE XAMINER		Customer No. 20987	Group Art Unit 2851	Confirmation No. 2034				
Invention: OPTIMIZATION METHOD OF APERTURE TYPE OF PROTECTION ALIGNER										
Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450										
***	nsmittal Form PTOL- \$ 1400.00			on.	Plant Fee:					
☑ The Director is as described I☐ Cha☑ Cre	s hereby authorized to below. arge the amount of dit any overpayment.	o charge and credit D		count No.	50-0238	8				
☐ Payment by c	Signature LESZ, JR.	•	ublic. Cre on and au Dated:			ot be				
ONE FREEDOM	M DRIVE, SUITE 126 0190									
CC: Certif This ce	icate of Transmission by ertificate may only be us by deposit account.	ed if paying	<u>.</u>	Certificate of M	Iailing by First Cla	ss Mail				
	document and authorizate facsimile transmitted to	ion to charge deposit	with the first class	United States Posss mail in an enve P.O. Box 1450, A	s correspondence is stal Service with suf- lope addressed to 'lexandria, VA 22313	fficient postage as Commissioner for				
	Signature			Signature of Per	son Mailing Correspo	ondence				
Tuned or Prin	ted Name of Person Signin	Cartificate	Typ	ed or Printed Name	of Person Mailine Co	orrespondence				